## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48			
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
FREEDOMWORKS FOR AMERICA				
	C C00499020			
Check if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee	Date of Public Distribution/Dissemination			
Freedomworks, Inc.	03 18 2014			
Mailing Address 400 N Capitol St., NW	Amount			
Suite 735				
City State Zip Code	104.07			
Washington DC 20001	Transaction ID : SE.12012 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Brannon-Travel  Category/ Type  002	M 03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office	e Sought: House District: 00			
GREGORY JOSEPH BRANNON Oppose	President State: NC State:			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	ursement For:			
Full Name of Payee Freedomworks, Inc.	Date of Public Distribution/Dissemination			
Mailing Address 400 N Capitol St., NW	03 19 2014			
Suite 735	Amount			
City State Zip Code	38.82			
Washington DC 20001	Transaction ID : SE.12013 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing  Category/ Type  004	03 19 2014			
Name of Federal Candidate Support Office	e Sought: House District:00			
KAY R HAGAN Oppose	President State: NC			
Calendar Year-To-Date Per Election for Office Sought  Disb 2014	ursement For:			
(a) SUBTOTAL of Itemized Independent Expenditures	142.89			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
24.0	3 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
FREEDOMWORKS FOR AMERICA	C C00499020			
Check if 24-hour report				
Full Name of Payee Freedomworks, Inc.	Date of Public Distribution/Dissemination			
Mailing Address 400 N Capitol St., NW	03 20 2014			
Suite 735	Amount			
City State	Zip Code 119.81			
Washington DC	20001 Transaction ID : SE.12014 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Brannon-Travel	Category/ Type 002 03 / 20 / 2014			
Name of Federal Candidate	Support Office Sought: House District: 00			
GREGORY JOSEPH BRANNON	Oppose President Senate State: NC			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
Freedomworks, Inc.	03 20 7 2014			
Mailing Address 400 N Capitol St., NW	Amount			
Suite 735				
City State Washington DC	Zip Code 51.76 20001 <b>Transaction ID : SE.12015</b>			
Purpose of Expenditure	Category/ O04 Date of Disbursement or Obligation			
IE-Brannon-Signage	Type 004 03 20 2014			
Name of Federal Candidate	Support Office Sought: House District: 00			
GREGORY JOSEPH BRANNON	Oppose President Senate State: NC			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2014 Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures				
	7 7			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	<b>)</b>			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
R. Russ Walker  Signature	lectronically Filed] Date 03 25 2014			
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## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	IN EXILIN	DITORLO	PAGE 3 O FOR SE OF FORI	
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NU	JMBER ▼
FREEDOMWORKS FOR AMERICA			C C00499020	
Check if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Disser	mination
Mailing Address 400 N Capitol St., NW				2014
Suite 735			Amount	
City	State	Zip Code		38.82
Washington	DC	20001	Transaction ID : SE.12016 Date of Disbursement or Obligat	ion
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004	M = M / D = D / Y =	2014
Name of Federal Candidate		Support	Office Sought: House District	t:00
KAY R HAGAN		X Oppose	President State State	e: NC
Calendar Year-To-Date Per Election for Office Sought		67793.46	Disbursement For:	General
Full Name of Payee			Date of Public Distribution/Disse	mination
Odd Lamps, LLC				2014
Mailing Address 12076 92nd Ave N			Amount	
City	State	Zip Code		450.00
Maple Grove	MN	55369	Transaction ID : SE.12011  Date of Disbursement or Obligat	ion
Purpose of Expenditure IE-Brannon-Video Ads		Category/ Type 004		2014
Name of Federal Candidate		X Support	Office Sought: House Distric	et:00
GREGORY JOSEPH BRANNON		Oppose	President State State	e: NC
Calendar Year-To-Date Per Election for Office Sought		42764.64	Disbursement For:	General
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures			<b>•</b>	40.1
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
R. Russ Walker Signature	[Electro	onically Filed] Date	03 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
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## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48			
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
FREEDOMWORKS FOR AMERICA	C C00499020			
Check if 24-hour report X 48-hour report New report Amends report filed	i on Mam / Dad / Yayayay			
Full Name of Payee Topple Strategies	Date of Public Distribution/Dissemination			
Toppie Strategies	03 / 24 / 2014			
Mailing Address 189 N. Hwy 89 Ste. C 130	Amount			
City State Zip Code	24990.00			
North Salt Lake UT 84054	Transaction ID : SE.12010  Date of Disbursement or Obligation			
Purpose of Expenditure IE-Brannon-Phone Calling  Category/ Type  004	03 / 24 / Y 2014			
Name of Federal Candidate Support Office	e Sought: House District: 00			
GREGORY JOSEPH BRANNON Oppose	President State: NC			
Calendar Year-To-Date Per Election for Office Sought  Disbute 2014	ursement For:			
Full Name of Payee	Date of Public Distribution/Dissemination			
	M = M / D = D / Y = Y = Y			
Mailing Address				
	Amount			
City State Zip Code				
	Date of Disbursement or Obligation			
Purpose of Expenditure  Category/ Type	M M / D D / Y Y Y Y			
Name of Federal Candidate Support Offic	e Sought: House District:			
Oppose	President Senate State:			
Calendar Year-To-Date Disb	ursement For: Primary General			
Per Election for Office Sought	Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	24990.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	25793.28			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
	03 25 2014			
Signature				